SUMMONS FOR WITNESS		DOCKET NUMBER			Trial Court of Massachusetts District Court Department		
SESSION: CRIMINAL JUVENILE J		- JURY DPR	JURY PROBATION		AND ADDRESS OF COURT DIVISION YOU MUST		
VIOLATION HEARING					Quincy District Court APPEAR AT		APPEAR AT
NAME, ADDRESS AND ZIP CODE OF DEFENDANT				One De	ennis F. Ryan I	Parkway	THIS COURT
Commonwealth vs.				Quincy, MA 02169 ADDRESS ON			
Oommonwealth vs.				DATE AND TIME OF APPEARANCE THE DATE			
				at		AND TIME	
						aı	SPECIFIED HEREIN
					40/47/44	ATT (5) ATT (A B.B.	HEREIN
					10/1//11	AT 8:45 A.M.	
					- CATE	T18 0F	
					DATE	TIME	
NAME, ADDRESS AND ZIP CODE OF WITNESS				OFFEN	NSE(S)		<u> </u>
Annie Khan (Dookhan)					To Dist. Clas	s D	
Executive Office of Health and Human Services							
Department of Public Health							
I •							
William A. Hinton State Laboratory Institute							
305 South Street							
Jamaica Plain, MA 02130							
TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH:							
You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness							
named within by delivering it to the defendant or witness personally, or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable and discretion then							
residing therein, or by mailing it to the last known address of the defendant or witness.							
NOTE: A summons for a witness may also be served by any person authorized to serve a summons							
in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.							
To the above named Witness:							1
You are hereby required in the name of the Commonwealth, to make your appearance before							
the Justices of the Court on the date and time noted above, and to appear from time to time							
and day to day thereafter as ordered. You are further required to bring with you:							
Any and all evidence regarding the drug certification in the matter of Defendant Angel Colon.							1
Certification							
						DATE OF ISSUE	<u> </u>
WITNESS:							
WITNESS: Thurban W. Morrosain							
			ď				
Michael W. Morrissey, District Attorney						June 27, 2017	
,							
RETURN OF SERVICE							
I hereby certify that I served the within summons upon the above named Defendant Witness by							
□ Delivering a copy of it personally to the defendant or witness.							
□ Leaving a copy of it at the dwelling house or usual place of abode of the defendant or witness with							
a person of suitable age and discretion residing therein.							
☐ Mailing a copy of it to the last known address of the defendant or witness.							
□ I received the summons on but I was unable to make service							
DATE RECEIVED							
because:							
BATE OF SECTION		0.011-1	DEDOOMAN	-m\ " < =		E DEBOON MANAGER + === :	<u>.</u>
DATE OF SERVICE		SIGNATURE OF	PERSON MAKING SE	RVICE		F PERSON MAKING SERVI	
9/6/11					Assistant District Attorney		